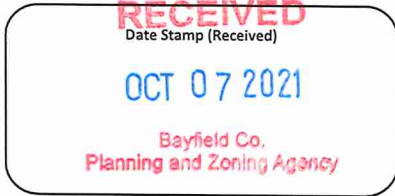


SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:  
Bayfield County  
Planning and Zoning Depart.  
PO Box 58  
Washburn, WI 54891  
(715) 373-6138

APPLICATION FOR PERMIT  
BAYFIELD COUNTY, WISCONSIN



Permit #:	22-0084
Date:	526-2210-8-2021
Amount Paid:	\$300.00
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.  
Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Original Application MUST be submitted

FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED →		<input checked="" type="checkbox"/> LAND USE		<input type="checkbox"/> SANITARY		<input type="checkbox"/> PRIVY		<input type="checkbox"/> CONDITIONAL USE		<input type="checkbox"/> SPECIAL USE		<input type="checkbox"/> B.O.A.		<input type="checkbox"/> OTHER	
Owner's Name: Randall & Marla Gilbertson				Mailing Address: 20435 South Sweden Rd.				City/State/Zip: Grand View WI 54839				Telephone: 715-520-2112			
Address of Property: see legal desc. below				City/State/Zip: Grand View, WI 54839								Cell Phone:			
Contractor:				Contractor Phone:				Plumber: Ray Visocki				Plumber Phone: 715-634-1679			
Authorized Agent: (Person Signing Application on behalf of Owner(s))				Agent Phone:				Agent Mailing Address (include City/State/Zip):				Written Authorization Attached <input type="checkbox"/> Yes <input type="checkbox"/> No			
PROJECT LOCATION		Legal Description: (Use Tax Statement)						Tax ID# 38040		Recorded Document: (Showing Ownership) 2021 R 589689					
NW 1/4, NE 1/4		Gov't Lot		Lot(s)		CSM		Vol & Page		CSM Doc #		Lot(s) #		Block #	
Subdivision:		Section 32		Township 45N		N, Range 6W		Town of: Grand View		Lot Size 17.479		Acreage 17.479			

<input type="checkbox"/> Shoreland	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline : _____ feet	Is your Property in Floodplain Zone? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue →	Distance Structure is from Shoreline : _____ feet		
<input checked="" type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) Is on the property or Will be on the property?	Type of Water on property
\$100,000	<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input checked="" type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> (New) Sanitary Specify Type: Mound	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input checked="" type="checkbox"/> Slab	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type:	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)			<input type="checkbox"/>	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property		Use	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	
	<input type="checkbox"/>		<input checked="" type="checkbox"/> Year Round		<input type="checkbox"/> Compost Toilet	
					<input type="checkbox"/> None	

Existing Structure: (if addition, alteration or business is being applied for)	Length:	Width:	Height:
Proposed Construction: (overall dimensions)	Length: 56'	Width: 48'	Height: 24'

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input checked="" type="checkbox"/>	Principal Structure (first structure on property)	(48 X 56)	2688
	<input checked="" type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.) 1 bldg w/ apartment inside	(16 X 50)	(800)
		with Loft	( X )	
		with a Porch	(12 X 20)	240
		with (2nd) Porch	( X )	
<input type="checkbox"/> Commercial Use		with a Deck	( X )	
		with (2nd) Deck	( X )	
		with Attached Garage	(32 X 56)	(1792)
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Bunkhouse w/ ( <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	( X )	
	<input type="checkbox"/>	Mobile Home (manufactured date) _____	( X )	
	<input type="checkbox"/>	Addition/Alteration (explain) _____	( X )	
	<input type="checkbox"/>	Accessory Building (explain) _____	( X )	
	<input type="checkbox"/>	Accessory Building Addition/Alteration (explain) _____	( X )	
	<input type="checkbox"/>	Special Use: (explain) _____	( X )	
	<input type="checkbox"/>	Conditional Use: (explain) _____	( X )	
	<input type="checkbox"/>	Other: (explain) _____	( X )	

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): Randall Gilbertson Marla K. Gilbertson  
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Date 10-25-2021

Authorized Agent: \_\_\_\_\_  
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date \_\_\_\_\_

Address to send permit 20435 South Sweden Rd. Grand View WI 54838  
Attach  
Copy of Tax Statement  
If you recently purchased the property send your Recorded Deed

Original Application MUST be submitted





In the box below: **Draw or Sketch your Property** (regardless of what you are applying for)

Fill Out in Ink – **NO PENCIL**

- (1) Show Location of:

Proposed Construction
- (2) Show / Indicate:

North (N) on Plot Plan
- (3) Show Location of (\*):

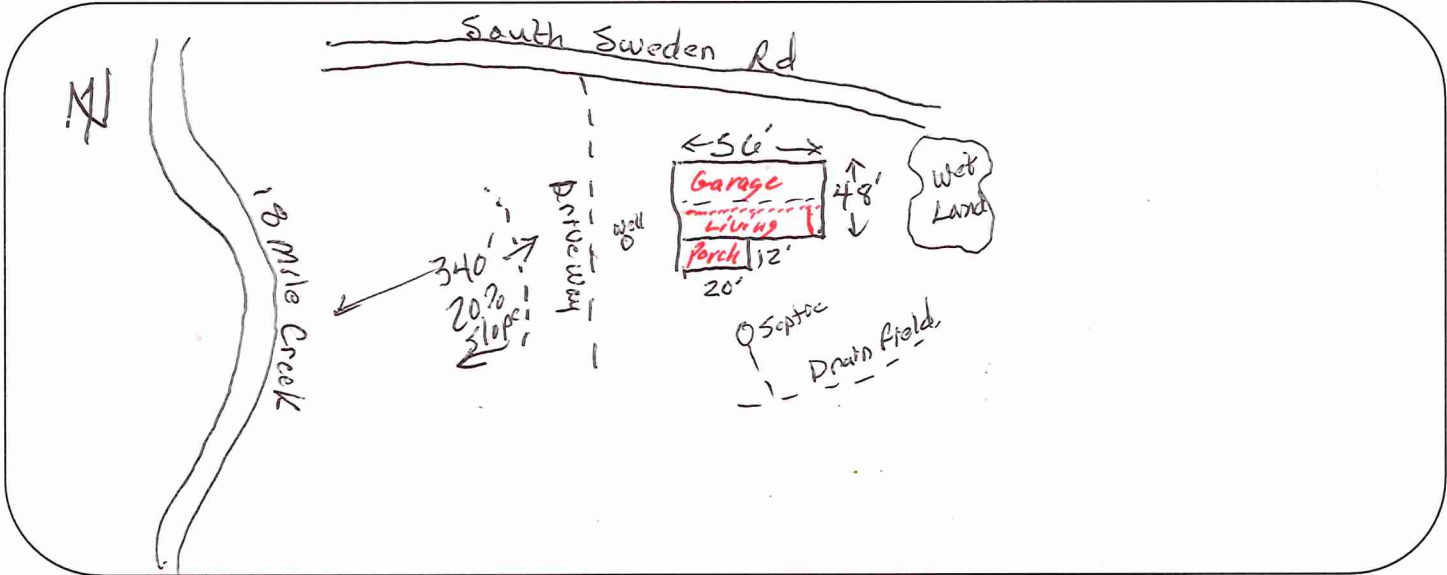
(\*) Driveway and (\*) Frontage Road (Name Frontage Road)
- (4) Show:

All Existing Structures on your Property
- (5) Show:

(\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)
- (6) Show any (\*):

(\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond
- (7) Show any (\*):

(\*) Wetlands; or (\*) Slopes over 20%



Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) **Setbacks:** (measured to the closest point)

Description	Setback Measurements	Description	Setback Measurements
Setback from the Centerline of Platted Road	310 Feet	Setback from the Lake (ordinary high-water mark)	Feet
Setback from the Established Right-of-Way	280 Feet	Setback from the River, Stream, Creek	340 Feet
		Setback from the Bank or Bluff	Feet
Setback from the North Lot Line	310 Feet		
Setback from the South Lot Line	1000 Feet	Setback from Wetland	50 Feet
Setback from the West Lot Line	400 Feet	20% Slope Area on the property	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	260 Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	50 Feet	Setback to Well	50 Feet
Setback to Drain Field	75 Feet		
Setback to Privy (Portable, Composting)	Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

**NOTICE:** All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.  
For the Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.  
The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)		Sanitary Number:		# of bedrooms: 1	Sanitary Date:	
Permit Denied (Date):		Reason for Denial:				
Permit #: 22-0084		Permit Date: 3-26-2022				
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Deed of Record)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Parcel in Common Ownership	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Fused/Contiguous Lot(s))	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Structure Non-Conforming	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)				
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:				
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Inspection Record:					Zoning District (A-1)	
					Lakes Classification (N/A)	
Date of Inspection: 10/13/21		Inspected by: [Signature]			Date of Re-Inspection:	
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No they need to be attached.)						
- Build as proposed						
- Get required WDC Inspections						
Signature of Inspector: [Signature]					Date of Approval: 4/29/22	
Hold For Sanitary: <input checked="" type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>		

## Ruth Hulstrom

---

**From:** Marla Gilbertson <gilbertson.marla@gmail.com>  
**Sent:** Wednesday, May 25, 2022 4:31 PM  
**To:** Ruth Hulstrom  
**Subject:** Re: Land Use Permit - Tax ID#

Yes, please change the 29' to 24'. Thank you.

Sent from my iPhone

On May 25, 2022, at 4:10 PM, Ruth Hulstrom <ruth.hulstrom@bayfieldcounty.wi.gov> wrote:

Randy,

Can you please verify that you want to change the overall height of the proposed construction to 24' from the 29' that you provided on 1

Thanks,

Ruth Hulstrom, AICP | Director  
Planning and Zoning Department  
117 E 5th Street, PO Box 58  
Washburn, WI 54891  
Phone: 715-373-3514  
Fax: 715-373-0114  
Email: [ruth.hulstrom@bayfieldcounty.wi.gov](mailto:ruth.hulstrom@bayfieldcounty.wi.gov)  
<image001.png>

Update  
Gilbertson  
land use app.  
tax id#  
38040

---

**From:** Marla Gilbertson <gilbertson.marla@gmail.com>  
**Sent:** Wednesday, May 25, 2022 4:09 PM  
**To:** Ruth Hulstrom <ruth.hulstrom@bayfieldcounty.wi.gov>  
**Subject:** Re: Land Use Permit - Tax ID#

The estimated total height will be 24 feet at the peak. The side walls are 14 feet.

Thanks for your help.

Randy Gilbertson

Sent from my iPhone

On May 25, 2022, at 2:29 PM, Ruth Hulstrom <[ruth.hulstrom@bayfieldcounty.wi.gov](mailto:ruth.hulstrom@bayfieldcounty.wi.gov)> wrote:

Randy,

Per our conversation in the office earlier today, please see the below image of the application that you submitted.

<image002.png>

This application indicates that the height of the structure was anticipated to be 29'.

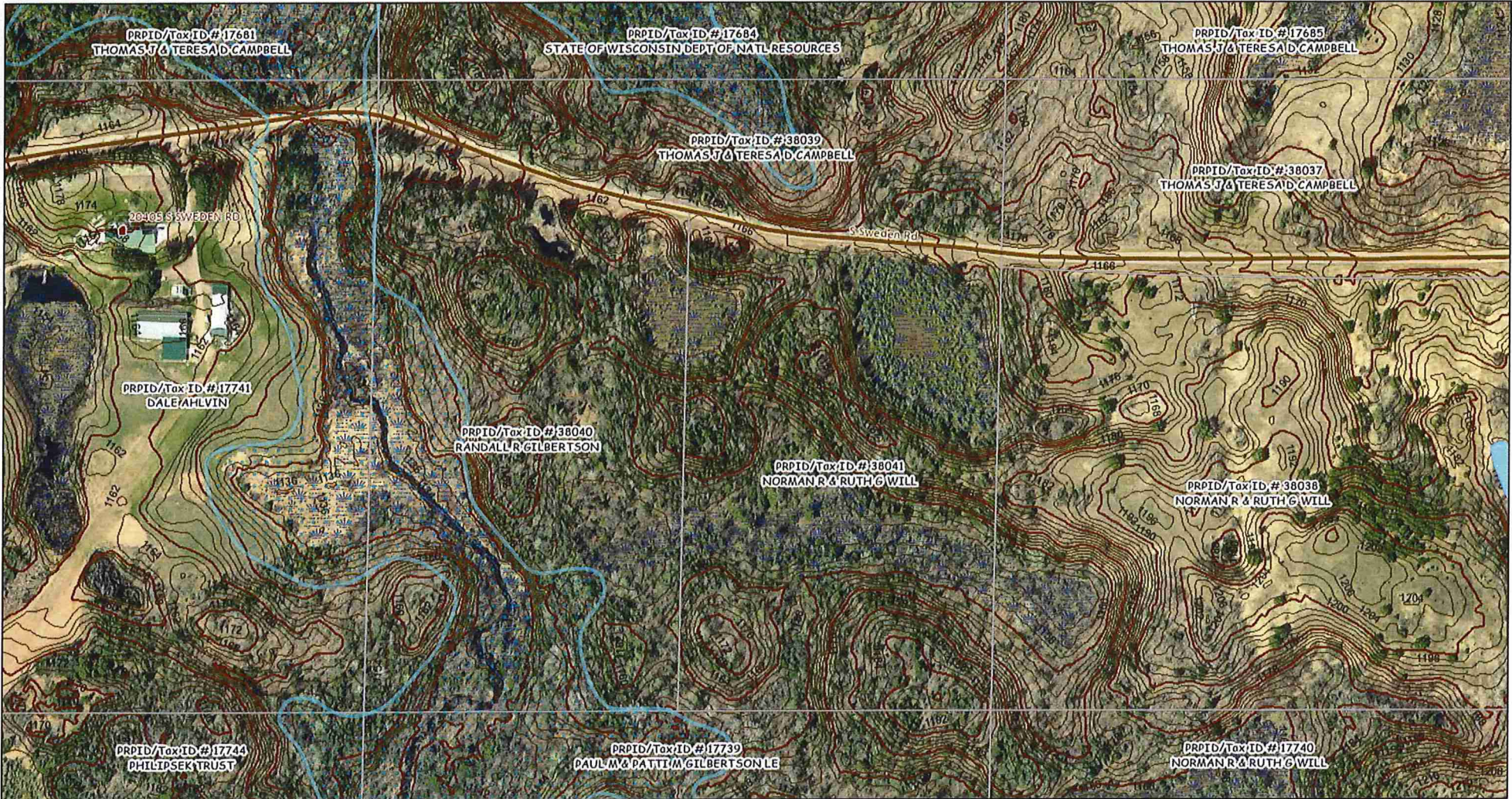
Please verify this is correct or provide the correct dimension and verify I can update the land use application with the correct height.

Thanks,

Ruth Hulstrom, AICP | Director  
Planning and Zoning Department  
117 E 5th Street, PO Box 58  
Washburn, WI 54891  
Phone: 715-373-3514  
Fax: 715-373-0114  
Email: [ruth.hulstrom@bayfieldcounty.wi.gov](mailto:ruth.hulstrom@bayfieldcounty.wi.gov)  
<image001.png>



Bayfield County, WI



10/13/2021, 9:29:25 AM

Wetlands

Rivers

Lakes

Approximate Parcel Boundary

Road Type

Town

Flood Plain Boundaries Active Dec 16th, 2011

A = Areas with a 1% annual chance of flooding and 26% chance of flooding over the life of a 30 yr. mortgage.

Building Footprint 2015

Building

bayfield\_gis.SDE.T\_Cable

Index

Intermediate

bayfield\_gis.SDE.T\_Bayview

Index

Intermediate

bayfield\_gis.SDE.T\_Barksdale

Index

Intermediate

bayfield\_gis.SDE.T\_Bayfield

Index

Intermediate

bayfield\_gis.SDE.Gull\_Island

Index

Intermediate

Bayfield, Bayfield County Land Records Department

Bayfield County Zoning Application  
<https://maps.bayfieldcounty.wi.gov/ZoningWAB/>



# TOWN BOARD RECOMMENDATION - - (CLASS A - SPECIAL USE)



When **Town Board** has completed this form, please mail to:

Bayfield County Planning and Zoning Department  
P.O. Box 58 – Washburn, WI 54891  
Phone – (715) 373-6138  
Fax – (715) 373-0114  
e-mail: zoning@bayfieldcounty.org

Website:  
www.bayfieldcounty.org/147

Date Zoning Received (Stamp Here)

NOV 15 2021

Bayfield Co.  
Planning and Zoning Agency

**Property Owner(s)** are responsible to give this form to the Town Clerk. **Attach a copy of the County Application (8 1/2 x 14) [front/back]**. This is a Class A special use request. **Note:** The Town's Planning Commission meets prior to the Town. Once the Town meets they will forward their recommendation to the Planning and Zoning Department. **Ask Town if you should be present at their meeting(s).**

**Property Owner** Randall Gilbertson **Contractor** \_\_\_\_\_

**Property Address** 20435 S. Sweden Rd **Authorized Agent** \_\_\_\_\_

Grand View, WI 54839 **Agent's Telephone** \_\_\_\_\_

**Telephone** 715-520-2112 **Written Authorization Attached:** Yes ( ) No ( )

**Accurate** Legal Description involved in **this request** (specify **only** the property involved with this application)

NW 1/4 of NE 1/4, Section 32, Township 45 N., Range 60 W. Town of Grand View

**Govt. Lot** \_\_\_\_\_ **Lot** \_\_\_\_\_ **Block** \_\_\_\_\_ **Subdivision** \_\_\_\_\_ **CSM#** \_\_\_\_\_

**Volume** \_\_\_\_\_ **Page** \_\_\_\_\_ **of Deeds** **Tax I.D.#** \_\_\_\_\_ **Acreage** \_\_\_\_\_

**Additional Legal Description:** West 1/2 South of S. Sweden Rd. 17.46 Ac

**Applicant:** (State what you are asking for) **Zoning District:** X **Lakes Classification** \_\_\_\_\_

Construct a Building with Residence Quarters  
in an Agricultural Zoning District.

We, the Town Board, **TOWN OF** Grand View, do hereby recommend to

☐ **Table**

☒ **Approval**

☐ **Disapproval**

**Have you reviewed this for Compatibility with the Comprehensive and/or Land Use Plan:** ☐ **Yes** ☐ **No**

**Township:** (In detail clearly state Town Board's reason for recommendation of tabling, approval or disapproval)

Good neighbors and Adds to Tax levy Also approved  
and access roads meet all standards. Permits from etc.

**\*\* THE FOLLOWING MUST BE INCLUDED WITH THIS FORM:**

1. The Tabled, Approval or Disapproval box checked
2. **The Town's reasoning for the tabling, approval or disapproval**
3. The form returned to Zoning Department **not a copy or fax**

**\*\* NOTE:**

Receiving Town Board approval, **does not** allow the start of construction or business, you **must** first obtain your permit card(s) from the Planning and Zoning Department.

Revised: November 2017

**Signed:**

**Chairman:** \_\_\_\_\_

**Supervisor:** \_\_\_\_\_

**Supervisor:** \_\_\_\_\_

**Supervisor:** \_\_\_\_\_

**Clerk:** \_\_\_\_\_

**Date:** 11/10/2021



Town Clerk



Description

Updated: 7/21/2021

Tax ID:	38040
PIN:	04-021-2-45-06-32-1 02-000-30000
Legacy PIN:	
Map ID:	
Municipality:	(021) TOWN OF GRAND VIEW
STR:	S32 T45N R06W
Description:	PAR IN NW NE IN DOC 2021R-589689 (MFL-CLOSED 25 YRS-YR OF ENTRY 2016)
Recorded Acres:	0.000
Calculated Acres:	17.479
Lottery Claims:	0
First Dollar:	No
ESN:	115

Tax Districts

Updated: 8/15/2019

1	STATE
04	COUNTY
021	TOWN OF GRAND VIEW
041491	SCHL-DRUMMOND
001700	TECHNICAL COLLEGE

Recorded Documents

Updated: 8/16/2019

MFL TRANSFER ORDER	
Date Recorded: 9/1/2021	2021R-590667
WARRANTY DEED	
Date Recorded: 7/12/2021	2021R-589689
MFL TRANSFER ORDER	
Date Recorded: 1/22/2020	2020R-580774
WARRANTY DEED	
Date Recorded: 8/5/2019	2019R-578532

Ownership

Updated: 7/21/2021

RANDALL R GILBERTSON	GRAND VIEW WI
MARLA K GILBERTSON	GRAND VIEW WI

Billing Address:	Mailing Address:
RANDALL R & MARLA K GILBERTSON	RANDALL R & MARLA K GILBERTSON
20435 S SWEDEN RD	20435 S SWEDEN RD
GRAND VIEW WI 54839	GRAND VIEW WI 54839

Site Address

\* indicates Private Road

N/A
-----

Property Assessment

Updated: 4/3/2020

2021 Assessment Detail			
Code	Acres	Land	Imp.
W6-MFL - CLOSED AFTER 2004	17.479	24,900	0
2-Year Comparison	2020	2021	Change
Land:	24,900	24,900	0.0%
Improved:	0	0	0.0%
Total:	24,900	24,900	0.0%

Property History

Parent Properties	Tax ID
04-021-2-45-06-32-1 02-000-10000	17738

HISTORY

Expand All History

White=Current Parcels

Pink=Retired Parcels

Tax ID: 17738

Pin: 04-021-2-45-06-32-1 02-000-10000

Leg. Pin: 021115310000

38040

This Parcel

Parents

Children

RECEIVED

OCT 07 2021

Bayfield Co.

Planning and Zoning Agency



Description	Updated: 7/21/2021
Tax ID:	38040
PIN:	04-021-2-45-06-32-1 02-000-30000
Legacy PIN:	
Map ID:	
Municipality:	(021) TOWN OF GRAND VIEW
STR:	S32 T45N R06W
Description:	PAR IN NW NE IN DOC 2021R-589689 (MFL-CLOSED 25 YRS-YR OF ENTRY 2016)
Recorded Acres:	0.000
Calculated Acres:	17.479
Lottery Claims:	0
First Dollar:	No
ESN:	115

Tax Districts	Updated: 8/15/2019
04	STATE
021	COUNTY
041491	TOWN OF GRAND VIEW
001700	SCHL-DRUMMOND TECHNICAL COLLEGE


Recorded Documents	Updated: 8/16/2019
MFL TRANSFER ORDER	
Date Recorded: 9/1/2021	2021R-590667
WARRANTY DEED	
Date Recorded: 7/12/2021	2021R-589689
MFL TRANSFER ORDER	
Date Recorded: 1/22/2020	2020R-580774
WARRANTY DEED	
Date Recorded: 8/5/2019	2019R-578532

HISTORY	<a href="#">Expand All History</a>	White=Current Parcels	Pink=Retired Parcels
Tax ID: 17738 Pin: 04-021-2-45-06-32-1 02-000-10000 Leg. Pin: 021115310000			
38040	This Parcel	↑ Parents	↓ Children

Ownership	Updated: 7/21/2021
RANDALL R GILBERTSON	GRAND VIEW WI
MARLA K GILBERTSON	GRAND VIEW WI

Billing Address:	Mailing Address:
RANDALL R & MARLA K GILBERTSON 20435 S SWEDEN RD GRAND VIEW WI 54839	RANDALL R & MARLA K GILBERTSON 20435 S SWEDEN RD GRAND VIEW WI 54839

Site Address	* indicates Private Road
N/A	

 **Property Assessment**

Updated: 4/3/2020

**2021 Assessment Detail**

<b>Code</b>	<b>Acres</b>	<b>Land</b>	<b>Imp.</b>
W6-MFL - CLOSED AFTER 2004	17.479	24,900	0

**2-Year Comparison**

	<b>2020</b>	<b>2021</b>	<b>Change</b>
<b>Land:</b>	24,900	24,900	0.0%
<b>Improved:</b>	0	0	0.0%
<b>Total:</b>	24,900	24,900	0.0%

Property History	Tax ID
Parent Properties	17738
<a href="#">04-021-2-45-06-32-1 02-000-10000</a>	

10/15/21 AD  
called - left message  
- Septic  
- Class - A  
- Bunk House NOT  
Marpe 13 legs of stool

Town, City, Village, State or Federal  
Permits May Also Be Required

LAND USE – **X (Wetlands)**  
SANITARY – **22-28S**  
SIGN –  
SPECIAL – **TBA (Tn of Grand View-11/15/2021)**  
CONDITIONAL –  
BOA –

**BAYFIELD COUNTY**

**PERMIT**

WEATHERIZE AND POST THIS PERMIT  
ON THE PREMISES DURING CONSTUCTION

No. **22-0084** Issued To: **Randall & Marla Gilbertson**

Parcel in  
Location: **NW ¼ of NE ¼ Section 32 Township 45 N. Range 6 W. Town of Grand View**  
In Doc# **2021R-58689**

Gov't Lot	Lot	Block	Subdivision	CSM#
-----------	-----	-------	-------------	------

**Residential Structure in Ag-1 zoning district**  
For: **[ 1-Story ] Residence (56' x 48'); Apartment inside (50' x 16'); Porch #1 (20' x 12'); Attached Garage (56' x 32') = at a Height of 24'**  
**(Disclaimer): Any future expansions or development would require additional permitting.**

**Condition(s): Build as Proposed. Uniform Dwelling Code (UDC) Permit from the locally contracted UDC Inspection Agency must be obtained prior to the start of construction. Meet and Maintain Setbacks including eaves and overhangs.**

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

**NOTE:** This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

**Tracy Pooler, AZA**

Authorized Issuing Official

**May 26, 2022**

Date



SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:  
Bayfield County  
Planning and Zoning Depart.  
PO Box 58  
Washburn, WI 54891  
(715) 373-6138

APPLICATION FOR PERMIT  
BAYFIELD COUNTY, WISCONSIN



Permit #:	22-0177	<b>ENTERED</b>
Date:	7-29-22	
Amount Paid:	\$1700 7-11-2022	
Other:	Rest JIG 1700-7-29-22 ATE JIG	
Refund:		

INSTRUCTIONS: No permits will be issued until all fees are paid.  
Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Original Application MUST be submitted

FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED → <input checked="" type="checkbox"/> LAND USE <input type="checkbox"/> SANITARY <input type="checkbox"/> PRIVY <input type="checkbox"/> CONDITIONAL USE <input type="checkbox"/> SPECIAL USE <input type="checkbox"/> B.O.A. <input type="checkbox"/> OTHER									
Owner's Name: Benjamin & Stephanie Shanks			Mailing Address: PO Box 7, Grand View			City/State/Zip: WI 54839-0007		Telephone:  	
Address of Property: 48230 Friendly Lane			City/State/Zip: Grand View, WI 54839					Cell Phone: (608) 438-2367	
Email: (print clearly) STEPUPBILINGS@VAHOO.COM									
Contractor: Justin Miller (715) 329-0829			Contractor Phone: 329-0829			Plumber: Ryan Strand (715) 558-1673		Plumber Phone: 558-1673	
Authorized Agent: (Person Signing Application on behalf of Owner(s)) Mike Furtak (715) 817-2034			Agent Phone: 817-2034			Agent Mailing Address (include City/State/Zip): 6173 Iron Lake Rd, WI 54847		Written Authorization Required (for Agent)	
PROJECT LOCATION Legal Description: (Use Tax Statement) 1/4, 1/4		Gov't Lot 3		Lot(s) 3		Tax ID# 16635, 16638		Recorded Document: (Showing Ownership) 2017R 570282	
Section 21, Township 44 N, Range 6 W		Town of: Grand View		Lot Size 2.12		Acreage 2.12			

<input checked="" type="checkbox"/> Shoreland	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes--continue →	Distance Structure is from Shoreline : _____ feet	Is your Property in Floodplain Zone? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input checked="" type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes--continue →	Distance Structure is from Shoreline : _____ feet		
<input type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) Is on the property or Will be on the property?	Type of Water on property
\$566,000	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input checked="" type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> (New) Sanitary Specify Type:	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input checked="" type="checkbox"/> Slab	<input checked="" type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type:	
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property		<input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	
	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Compost Toilet	
					<input type="checkbox"/> None	

Existing Structure: (if addition, alteration or business is being applied for)	Length:	Width:	Height:
Proposed Construction: (overall dimensions)	Length: 92'	Width: 32'	Height: 24'

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/>	Principal Structure (first structure on property)	( X )	
	<input checked="" type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	( 44' X 34' )	1,496
		with Loft	( 44' X 34' )	1,496
		with a Porch covered patio	( 19' X 4' )	76
		with (2nd) Porch covered	( 12' X 32' )	384
		with a Deck	( 28' X 5' )	140
<input type="checkbox"/> Commercial Use		with (2nd) Deck Fire place	( 5' X 2' )	10
		with Attached Garage	( 36' X 32' )	1,152
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Bunkhouse w/ ( <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities )	( X )	
	<input type="checkbox"/>	Mobile Home (manufactured date) _____	( X )	
	<input type="checkbox"/>	Addition/Alteration (explain) _____	( X )	
	<input type="checkbox"/>	Accessory Building (explain) _____	( X )	
	<input type="checkbox"/>	Accessory Building Addition/Alteration (explain) _____	( X )	
	<input type="checkbox"/>	Special Use: (explain) _____	( X )	
	<input type="checkbox"/>	Conditional Use: (explain) _____	( X )	
	<input type="checkbox"/>	Other: (explain) _____	( X )	

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): \_\_\_\_\_  
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: Mike Furtak (See Note below)  
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit PO Box 7, Grand View, WI 54839-0007

Date \_\_\_\_\_  
Date 5-31-2022

Attach  
Copy of Tax Statement ✓  
If you recently purchased the property send your Recorded Deed

Turn Over



In the box below: **Draw or Sketch your Property** (regardless of what you are applying for)

- (1) Show Location of: **Proposed Construction**  
(2) Show / Indicate: **North (N) on Plot Plan**  
(3) Show Location of (\*): **(\*) Driveway and (\*) Frontage Road (Name Frontage Road)**  
(4) Show: **All Existing Structures on your Property**  
(5) Show: **(\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)**  
(6) Show any (\*): **(\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond**  
(7) Show any (\*): **(\*) Wetlands; or (\*) Slopes over 20%**

**Fill Out in Ink – NO PENCIL**

See attachment

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning &amp; Zoning Dept.

(8) **Setbacks:** (measured to the closest point)

Description	Setback Measurements	Description	Setback Measurements
<i>Friendly Lane - easement Rd</i>			
Setback from the Centerline of Platted Road	98 Feet	Setback from the Lake (ordinary high-water mark)	66 Feet
Setback from the Established Right-of-Way	NA Feet	Setback from the River, Stream, Creek	NA Feet
		Setback from the Bank or Bluff	NA Feet
Setback from the North Lot Line	65 Feet		
Setback from the South Lot Line <i>10' to Lot B</i>	110 Feet	Setback from Wetland	NA Feet
Setback from the West Lot Line <i>Lake</i>	700 NA Feet	20% Slope Area on the property	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	63 120+ Feet	Elevation of Floodplain	NA Feet
Setback to Septic Tank or Holding Tank	TBD Feet	Setback to Well	45 Feet
Setback to Drain Field	TBD Feet		
Setback to Privy (Portable, Composting)	NA Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) **Stake or Mark Proposed Location(s)** of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).**NOTICE(s):**

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For the Construction of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

<b>Issuance Information (County Use Only)</b>		Sanitary Number: <i>22-775</i>	# of bedrooms:	Sanitary Date:
Permit Denied (Date):		Reason for Denial:		
Permit #: <i>22-0177</i>		Permit Date: <i>7-29-2022</i>		
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Deed of Record)</i>	<input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Parcel in Common Ownership	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Fused/Contiguous Lot(s))</i>	<input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Structure Non-Conforming	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> No	Affidavit Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Case #:		Case #:		
Was Parcel Legally Created		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Was Proposed Building Site Delineated		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Inspection Record:		Zoning District <i>(R-1)</i> Lakes Classification <i>(1)</i>		
Date of Inspection:		Inspected by:		Date of Re-Inspection:
Condition(s): <u>Town, Committee or Board Conditions Attached?</u> <input type="checkbox"/> Yes <input type="checkbox"/> No – (If <u>No</u> they need to be attached.)				
<i>- Get Required UDC Inspections</i> <i>- Maintain the 35' Deep Shoreland Vegetative buffer outside the allowed 70' wide viewing &amp; access corridor, Work with Bayfield Land Conservation with Management plan</i>				
Signature of Inspector: <i>[Signature]</i>				Date of Approval: <i>7/27/22</i>
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>



**Bayfield County  
Impervious Surface Calculations**

Bayfield Co.  
Planning and Zoning Agency

These calculations are **REQUIRED** per WI Admin Code NR 115.05(1)(e) and Section 13-1-32(g) and 13-1-40(h) of the Bayfield County Code of Ordinances. The undersigned hereby makes application for construction, reconstruction, expansion, replacement or relocation of any impervious surface within 300 feet of the ordinary high water mark and agrees that all activities shall be in accordance with the requirements of the Bayfield County Code of Ordinances and all other applicable ordinances and the laws of the State of Wisconsin.

Pursuant to Chapter 1, Title 13, Section 13-1-106(d) of the Bayfield County Zoning Ordinance(s), Planning and Zoning Department employees assigned to inspect properties shall have access to said properties to make inspections.

Property Owner(s): <b>Benjamin &amp; Stephanie Shanks</b>					
Mailing Address: <b>PO Box 7, Grand View, WI 54839-0007</b>			Property Address <b>48230 Friendly Lane, Grand View, WI 54839</b>		
Legal Description: _____ 1/4, _____ 1/4,			Section, Township, Range Sec <b>21</b> Township <b>44</b> N, Range <b>6</b> W		
Authorized Agent/Contractor <b>Mike Fortak</b>		Gov't Lot <b>3</b>	Lot #	CSM#	Vol & Page
Lot(s) #	Block(s) #	Subdivision		Town of: <b>Grand View</b>	
Parcel ID # (PIN #) <b>04-021-2-44-06-21-4 05-003-02000</b>		Tax ID # <b>16635, 16638</b>		Date: <b>5-31-2022</b>	

**Impervious Surface:** An area that releases as runoff all or a majority of the precipitation that falls on it. "Impervious surface" excludes frozen soil but includes rooftops, sidewalks, driveways, parking lots and streets unless specifically designed, constructed and maintained to be pervious.

**Calculation of Impervious Surface:** Percentage of impervious surface shall be calculated by dividing the surface area of existing and proposed impervious surfaces on the portion of a lot or parcel that is within 300 feet of the ordinary high water mark by the total surface area of the lot or parcel, multiplied by 100.

**Impervious Surface Standard:** Allow up to 15% impervious surface but not more than 30% impervious surface on the portion of a lot or parcel that is within 300 feet of the ordinary high water mark. A permit can be issued for development that exceeds 15% impervious surface but not more than 30% impervious surfaces with a mitigation plan that meets the requirements of the Bayfield County Ordinance(s).

**Existing Impervious Surfaces:** For existing impervious surfaces that were lawfully placed when constructed but that do not comply with the standards in Section(s) 13-1-32(g) and Section 13-1-40(h), the property owner may do any of the following:

- a. Maintenance and repair of all impervious surfaces:
- b. Replacement of existing impervious surfaces with similar surfaces within the existing building footprint;
- c. Relocation or modification of existing impervious surfaces with similar or different impervious surfaces, provided that the relocation or modification does not result in an increase in the percentage that existed on the effective date of the county shoreland ordinance, and meets the applicable setback requirements in Section 13-1-32.

Impervious Surface Item	Dimension	Area (Square Footage)
Existing House		
Existing Accessory Building/Garage <i>shed</i>	<i>15' x 12'</i>	<i>180</i>
Existing Sidewalk(s), Patio(s) & Deck(s)		
Existing Covered Porch(es), Driveway & Other Structures	<i>110' x 20'</i>	<i>2,200</i>
Proposed Addition/House <i>2' eaves</i>	<i>36' x 98'</i>	<i>3,528</i>
Proposed Accessory Building/Garage		
Proposed Sidewalk(s) & Patio(s)		
Proposed Covered Porch(es) & Deck(s)		
Proposed Driveway		
Proposed Other Structures		
<b>Total:</b>		<i>5,908</i>

- Parcel A

a. Total square footage of lot: *2.12 acres (43,560) = 92,347 sq ft*
- Parcel B

b. Total impervious surface area: *2.07 acres (43,560) = 90,169 sq ft*
- c. Percentage of impervious surface area:

100 x (b)/a = *6.39%*

If the proposed impervious surface area is greater than 15% mitigation is required.

Parcel A

27,704

Total square footage of additional impervious surface allowed:

@ 15% *13,852*

@ 30% *21,796*

Issuance Information (County Use Only)		Date of Inspection: <i>7/22/22</i>
Inspection Record:		Zoning District <i>(R-1)</i> Lakes Classification <i>( )</i>
Condition(s): <i>Viewing + Access Corridor will move with Movement of House</i>		Stormwater Management Plan Required: <input type="checkbox"/> Yes <input type="checkbox"/> No
Signature of Inspector: <i>A. Apple</i>		Date of Approval: <i>7/27/22</i>



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Bayfield Co.  
Planning and Zoning Agency

15' 11/16"

40'

FOUNDATION PLAN

S

16' 11/16"

Lake Knotting

N

17346

2022

ADVANCED HOUSE PLANS IS A PROFESSIONAL RESIDENTIAL DESIGN FIRM LOCATED IN OHIO. WE RESERVE THE RIGHT TO MAKE ANY CHANGES TO THE SUITABILITY OF THESE PLANS FOR USE ON YOUR SPECIFIC SITE. CONSTRUCTION FROM THESE PLANS MUST BE BY AN ADVERTISED ARCHITECT AND A LICENSED PROFESSIONAL. INTERPRETATION OF THESE PLANS IS THE RESPONSIBILITY OF THE ARCHITECT. ADVANCED HOUSE PLANS IS NOT RESPONSIBLE FOR ANY CHANGES OR MODIFICATIONS TO THESE PLANS. ADVANCED HOUSE PLANS IS NOT RESPONSIBLE FOR ANY CHANGES OR MODIFICATIONS TO THESE PLANS.

advancedhouseplans

www.advancedhouseplans.com 644.675.5535

Ben Shanks

ahp

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7/22

48330

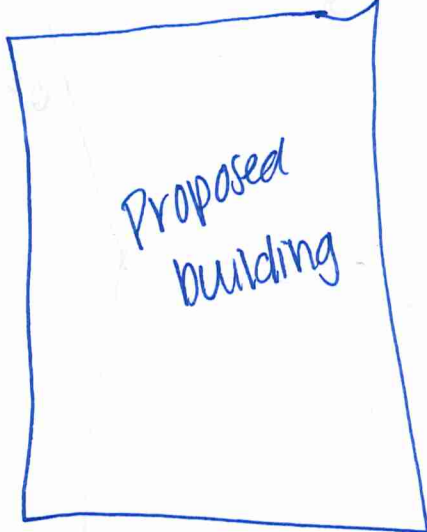
MS, Em

Lake Knott



520

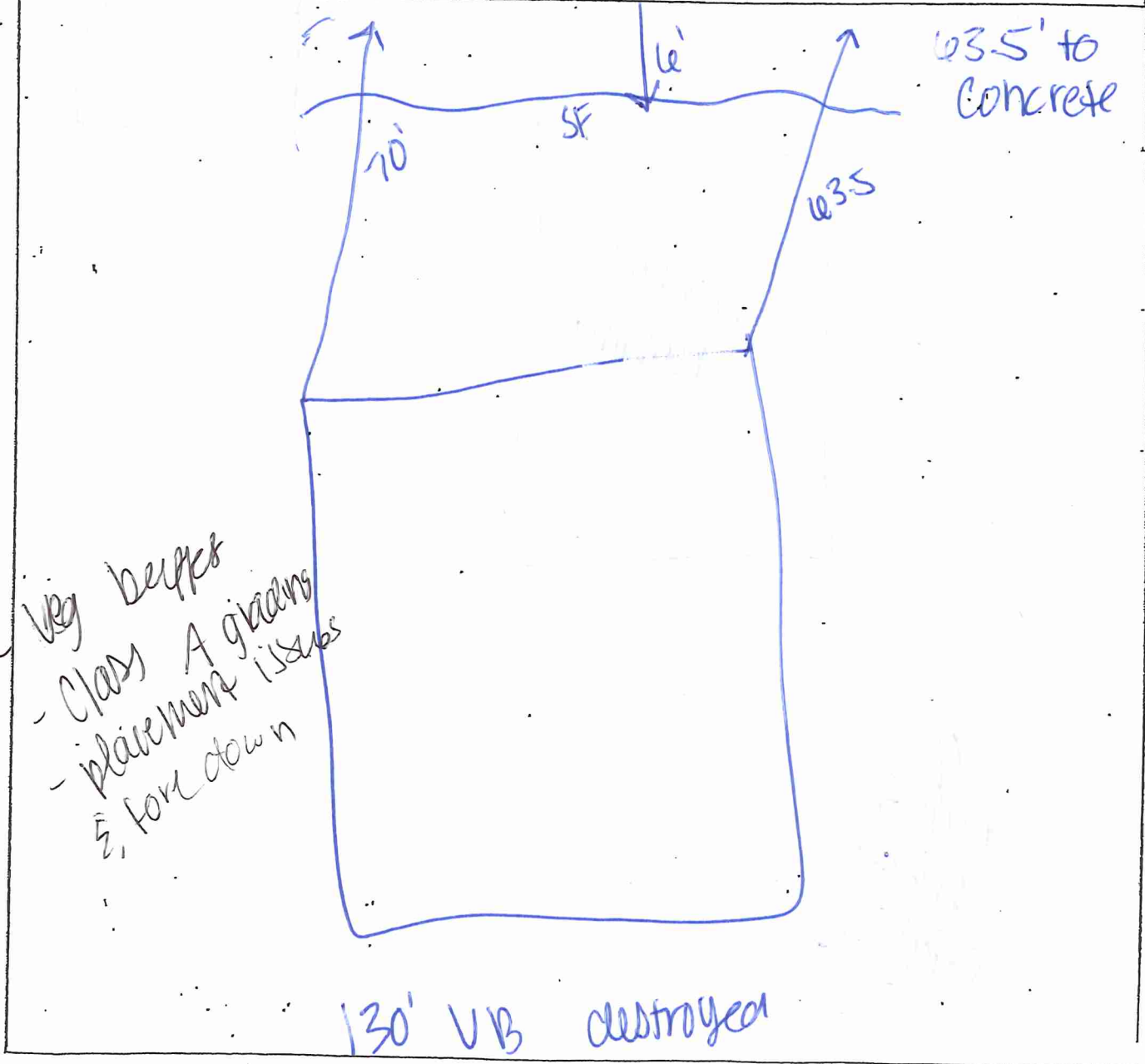
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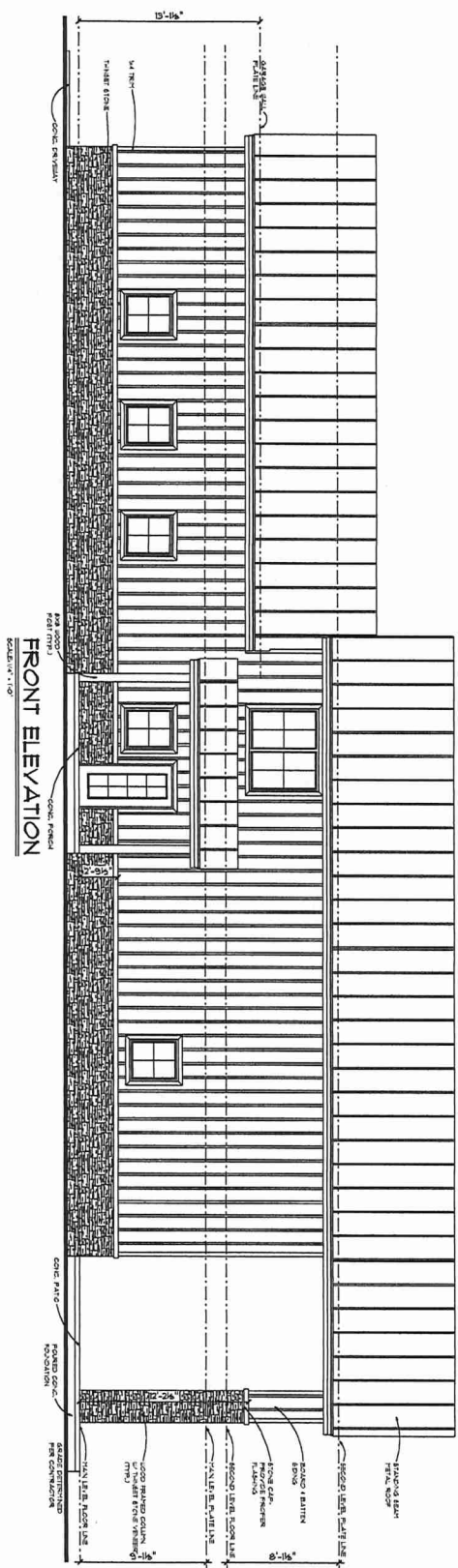
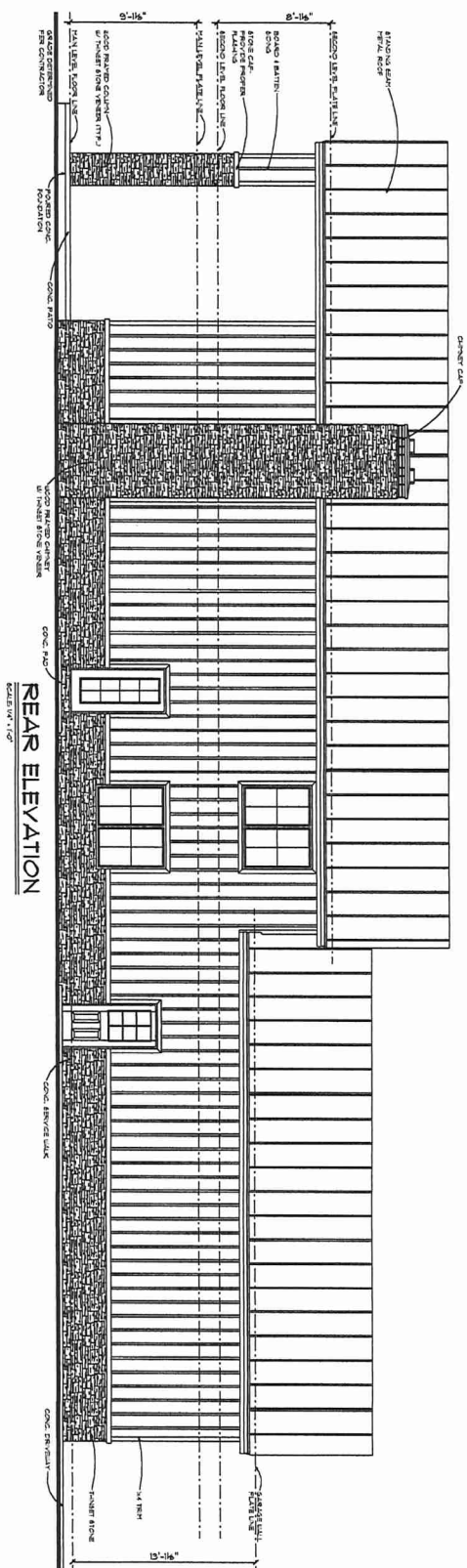


$$\begin{array}{r} 40 \\ + 2.5 \\ \hline 42.5 \end{array}$$

Field Investigation

Date:	Arrive:	Depart:
Landowner: Shanks	Photos taken:	Yes      No
Project Location: 48230 Friendly Lane	Persons Present:	
Waterway:	Purpose of visit:	
PIN# _____ *Attach Real Estate Inquiry*	<input checked="" type="checkbox"/> ZP Onsite      _____ SAP	
	_____ Sanitary      _____ Wetland Delineation	
	_____ Floodplain      _____ OHWM	
	_____ Boathouse      _____ Complaint	
	_____ Averaging      _____ Walkout	
Paid \$ _____ Receipt # _____	_____ Other: _____	









JUN 21 2022  
Bayfield Co.  
Planning and Zoning Agency





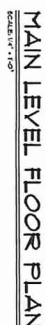
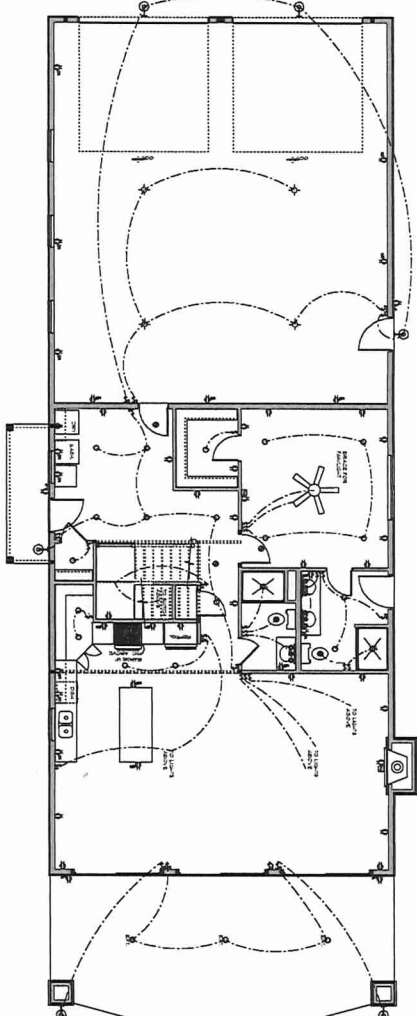
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Planning and Zoning Agency



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JUN 21 2022

OPENING SCHEDULE				
OPENING ID	TYPE	PROJECT CODE	SIZE	COUNT
1	SEWER	2040 ELEMENT 1	8'0" x 8'0"	1
2	SEWER	2040 ELEMENT 1	5'0" x 8'0"	5
A	000000	000000 ELEMENT	8'0" x 8'0"	3
B	000000	000000 ELEMENT	8'0" x 8'0"	3
C	000000	000000 ELEMENT	8'0" x 8'0"	3
D	000000	000000 ELEMENT	8'0" x 8'0"	3
E	000000	000000 ELEMENT	8'0" x 8'0"	3
F	000000	000000 ELEMENT	8'0" x 8'0"	3
G	000000	000000 ELEMENT	8'0" x 8'0"	3
H	000000	000000 ELEMENT	8'0" x 8'0"	3
I	000000	000000 ELEMENT	8'0" x 8'0"	3
J	000000	000000 ELEMENT	8'0" x 8'0"	3

[illegible]

## MAIN LEVEL ELECTRICAL PLAN

GENERAL NOTES:  
1. ALL MAIN LEVEL  
CELLS ARE 8'11"8"  
HIGH UNLESS NOTED  
OTHERWISE  
2. ALL ASKED CELLS  
ARE 4'8" DEEP UNLESS  
NOTED OTHERWISE  
3. ALL EXTERIOR WALLS ARE  
6" (8" MIN.) (24" MIN.)  
4. ALL INTERIOR WALLS ARE 3"  
UNLESS NOTED OTHERWISE  
5. FLOOR LOCATION DIFFERENCES  
PER CONNECTION

MAIN LEVEL	1403 kg N
SECOND LEVEL	698 kg N
TOTAL FINE-BED	2100 kg N
COY PORCH	82 kg N
COY. PATO	457 kg N
GARAGE	761 kg N

17346

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**advancedhouseplans**  
www.advancedhouseplans.com 844.675.9535



Ben Shanke



07-01-11
FINAL
07-01-11
REVISION

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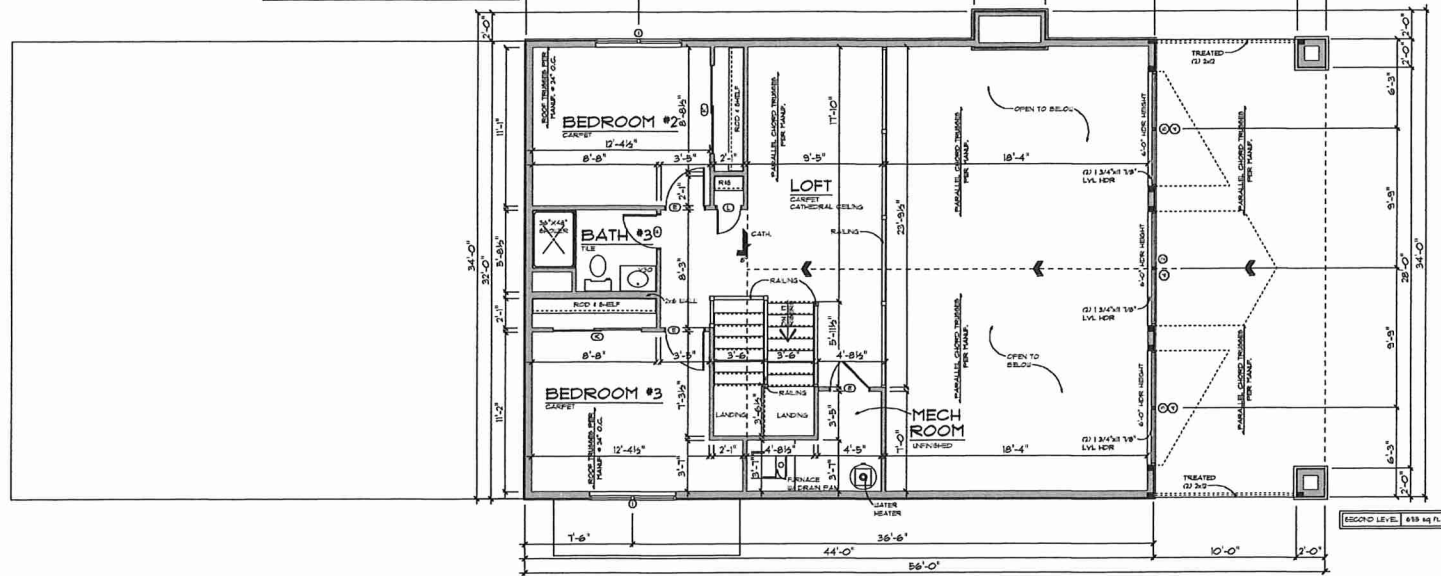
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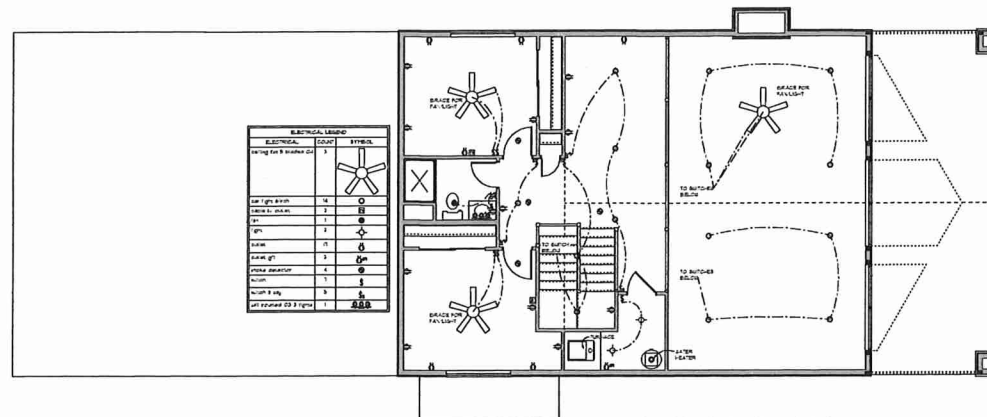
Bayfield Co.  
Planning and Zoning Agency

OPENING SCHEDULE				
OPENING ID	TYPE	PRODUCT CODE	SIZE	COUNT
1	WINDOW	TRAPZOID	8'-0" x 8'-0"	3
2	WINDOW	TRAPZOID	8'-0" x 4'-4"	1
3	WINDOW	TRAPZOID	8'-0" x 4'-4"	1
4	WINDOW	TRAPZOID	8'-0" x 4'-4"	1
5	WINDOW	TRAPZOID	8'-0" x 4'-4"	1
6	DOOR	TRAPZOID	7'-8" x 4'-4"	3
7	DOOR	TRAPZOID	7'-8" x 4'-4"	1
8	DOOR	TRAPZOID	7'-8" x 4'-4"	1
9	DOOR	TRAPZOID	7'-8" x 4'-4"	1
10	DOOR	TRAPZOID	7'-8" x 4'-4"	1
11	DOOR	TRAPZOID	7'-8" x 4'-4"	1
12	DOOR	TRAPZOID	7'-8" x 4'-4"	1
13	DOOR	TRAPZOID	7'-8" x 4'-4"	1
14	DOOR	TRAPZOID	7'-8" x 4'-4"	1
15	DOOR	TRAPZOID	7'-8" x 4'-4"	1
16	DOOR	TRAPZOID	7'-8" x 4'-4"	1
17	DOOR	TRAPZOID	7'-8" x 4'-4"	1
18	DOOR	TRAPZOID	7'-8" x 4'-4"	1
19	DOOR	TRAPZOID	7'-8" x 4'-4"	1
20	DOOR	TRAPZOID	7'-8" x 4'-4"	1
21	DOOR	TRAPZOID	7'-8" x 4'-4"	1
22	DOOR	TRAPZOID	7'-8" x 4'-4"	1
23	DOOR	TRAPZOID	7'-8" x 4'-4"	1
24	DOOR	TRAPZOID	7'-8" x 4'-4"	1
25	DOOR	TRAPZOID	7'-8" x 4'-4"	1
26	DOOR	TRAPZOID	7'-8" x 4'-4"	1
27	DOOR	TRAPZOID	7'-8" x 4'-4"	1
28	DOOR	TRAPZOID	7'-8" x 4'-4"	1
29	DOOR	TRAPZOID	7'-8" x 4'-4"	1
30	DOOR	TRAPZOID	7'-8" x 4'-4"	1
31	DOOR	TRAPZOID	7'-8" x 4'-4"	1
32	DOOR	TRAPZOID	7'-8" x 4'-4"	1
33	DOOR	TRAPZOID	7'-8" x 4'-4"	1
34	DOOR	TRAPZOID	7'-8" x 4'-4"	1
35	DOOR	TRAPZOID	7'-8" x 4'-4"	1
36	DOOR	TRAPZOID	7'-8" x 4'-4"	1
37	DOOR	TRAPZOID	7'-8" x 4'-4"	1
38	DOOR	TRAPZOID	7'-8" x 4'-4"	1
39	DOOR	TRAPZOID	7'-8" x 4'-4"	1
40	DOOR	TRAPZOID	7'-8" x 4'-4"	1
41	DOOR	TRAPZOID	7'-8" x 4'-4"	1
42	DOOR	TRAPZOID	7'-8" x 4'-4"	1
43	DOOR	TRAPZOID	7'-8" x 4'-4"	1
44	DOOR	TRAPZOID	7'-8" x 4'-4"	1
45	DOOR	TRAPZOID	7'-8" x 4'-4"	1
46	DOOR	TRAPZOID	7'-8" x 4'-4"	1
47	DOOR	TRAPZOID	7'-8" x 4'-4"	1
48	DOOR	TRAPZOID	7'-8" x 4'-4"	1
49	DOOR	TRAPZOID	7'-8" x 4'-4"	1
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60	DOOR	TRAPZOID	7'-8" x 4'-4"	1
61	DOOR	TRAPZOID	7'-8" x 4'-4"	1
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88	DOOR	TRAPZOID	7'-8" x 4'-4"	1
89	DOOR	TRAPZOID	7'-8" x 4'-4"	1
90	DOOR	TRAPZOID	7'-8" x 4'-4"	1
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98	DOOR	TRAPZOID	7'-8" x 4'-4"	1
99	DOOR	TRAPZOID	7'-8" x 4'-4"	1
100	DOOR	TRAPZOID	7'-8" x 4'-4"	1

GENERAL NOTES:  
1. ALL ROOMS LEVEL  
2. ALL ROOMS ARE 8'0" HIGH UNLESS NOTED OTHERWISE  
3. ALL ANGLED WALLS ARE 45 DEG UNLESS NOTED OTHERWISE  
4. ALL EXTERIOR WALLS ARE 4" x 12" STUDS @ 16" O.C. (BATHS)  
5. ALL INTERIOR WALLS ARE 3 1/2" UNLESS NOTED OTHERWISE



SECOND LEVEL FLOOR PLAN  
SCALE: 1/4" = 1'-0"



SECOND LEVEL ELECTRICAL PLAN  
SCALE: 3/4" = 1'-0"



PROJECT  
DATE  
DESIGNER  
REVISION

Ben Shanks



advancedhouseplans.com  
www.advancedhouseplans.com  
1-800-451-3231

ADVANCED HOUSE PLANS is a professional architectural design firm. We are not responsible for the construction of the plans. The plans are provided as a guide only. The client is responsible for obtaining all necessary permits and for the construction of the plans. The plans are provided as a guide only. The client is responsible for obtaining all necessary permits and for the construction of the plans.

2022  
17346

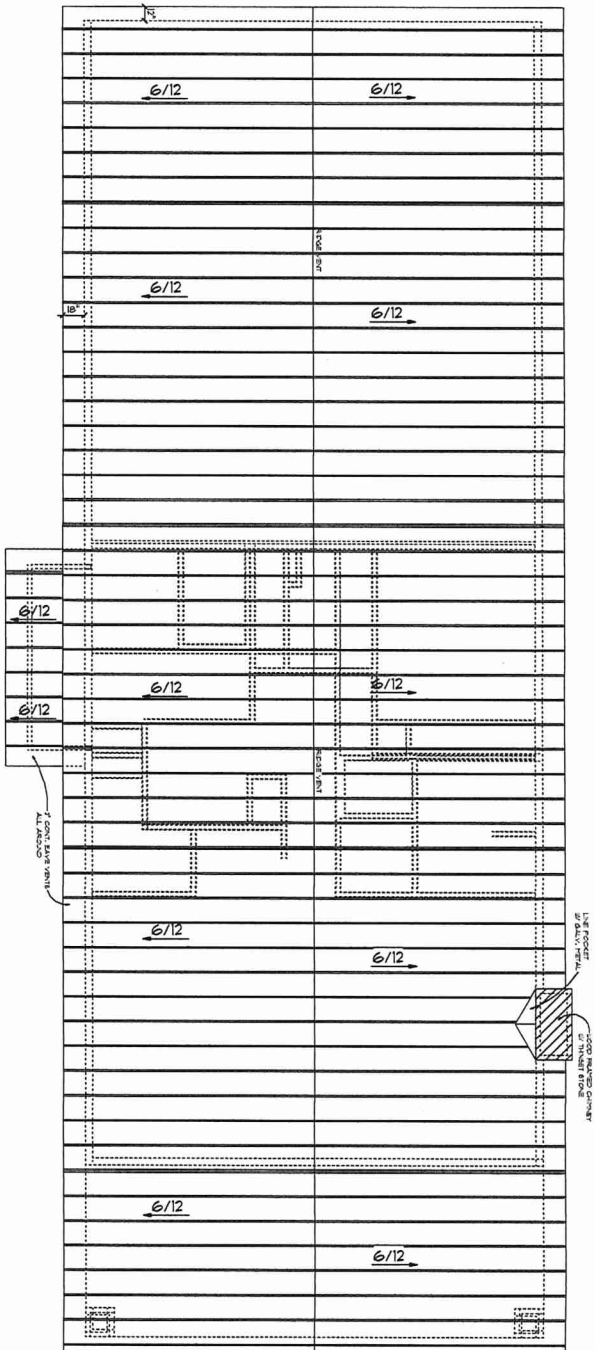
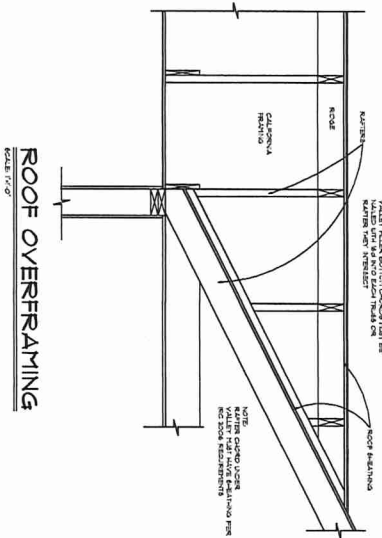
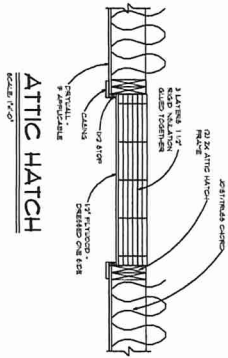
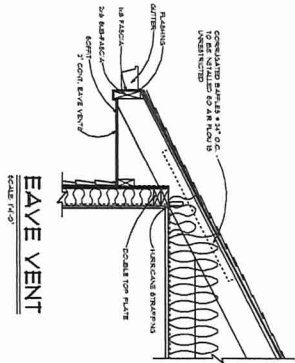
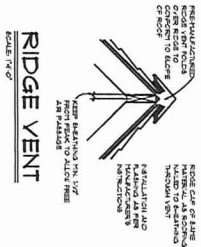
SHEET  
6  
6

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JUN 21 2022

Bayfield Co.  
Planning and Zoning Agency



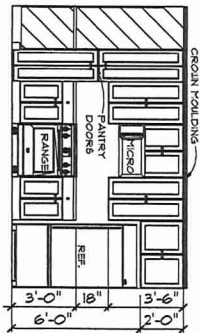
**ROOF PLAN**

# ROOF OVERFRAMING

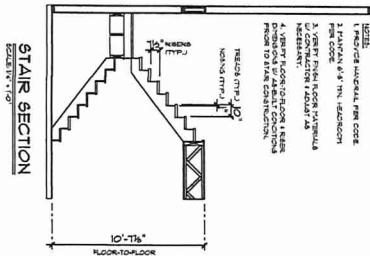
RECEIVED

JUN 21 2022

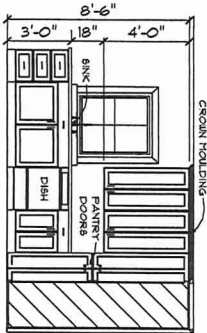
Bayfield Co.  
Planning and Zoning Agency



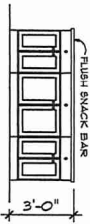
DETAIL 1



STAIR SECTION

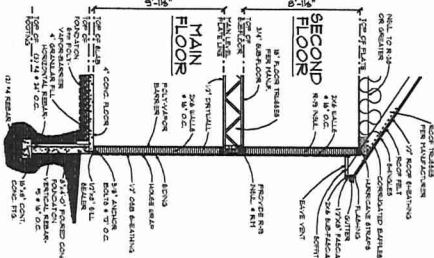


DETAIL 2

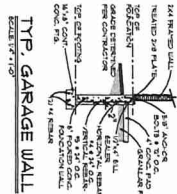


DETAIL 3

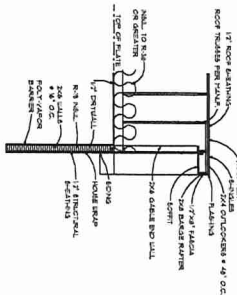
CABINET ELEVATIONS  
SCALE 3/8" = 1'-0"



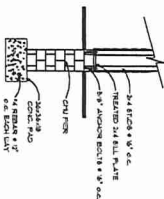
TYP. WALL SECTION



TYP. GARAGE WALL



TYP. GABLE END SECTION



WOOD FRAMED COLUMN  
FOOTING DETAIL  
SCALE 1/4" = 1'-0"



Ben Shanks



17346

17346



S.L 10' to B  
S.L 110' to neighbor

66' to OTWM

Town, City, Village, State or Federal  
Permits May Also Be Required

(After the Fact)

LAND USE – X  
SANITARY – 22-77S  
SIGN –  
SPECIAL –  
CONDITIONAL –  
BOA –

# BAYFIELD COUNTY

# PERMIT

WEATHERIZE AND POST THIS PERMIT  
ON THE PREMISES DURING CONSTRUCTION

No.	22-0177		Issued To:		Benjamin and Stephanie Shanks								
Location:	1/4	of	1/4	Section	21	Township	44	N.	Range	6	W.	Town of	Grand View
Par In													
Gov't Lot	3	Lot		Block		Subdivision		CSM#					
In Doc#	2017R-570282												

Residential Structure in R-1 zoning district in Shoreland with Impervious Surface Calculations.  
For: **After the Fact:** [ 1-Story w/Loft ] Residence (44' x 34'); Loft (44' x 34'); Covered Patio (19' x 4'); Covered Porch (12' x 32'); Deck (28' x 5'); Fireplace (5' x 2'); Attached Garage (36' x 32') at a Height of 24'

Condition(s): **A Uniform Dwelling Code (UDC) Permit from the locally contracted UDC Inspection Agency must be obtained prior to the start of construction. Meet and maintain setbacks including eaves & overhangs as approved. Maintain the 35' deep shoreland vegetative buffer outside the allowed 70' wide viewing corridor. Work with Bayfield County Land Conservation with Management Plan.**

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

**NOTE:** This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval.  
This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

**Tracy Pooler, AZA**  
\_\_\_\_\_  
Authorized Issuing Official  
  
**July 29, 2022**  
\_\_\_\_\_  
Date